

AMBULANCE REVENUE and COST REPORT
FIRE DISTRICT and SMALL RURAL COMPANY

Arizona Department of Health Services
Annual Ambulance Financial Report

Superior Emergency Medical Services
Reporting Ambulance Service

Address: PO Box 218

City: Superior Zip: 85173

Report Fiscal Year

From: July 1, 2012 To: June 31, 2013
Mo. Day Year Mo. Day Year

I hereby verify that I have directed the preparation of the enclosed annual report in accordance with the reporting requirements of the State of Arizona.

I have read this report and hereby verify that the information provided is true and correct to the best of my knowledge.

This report has been prepared using the accrual basis of accounting.

Authorized Signature:  Date: May 9, 2014

Print Name and Title: Operations Chief Todd Pryor

Phone: (520) 827-0176

Mail to:

Department of Health Services
Bureau of Emergency Medical Services
Certificate of Necessity and Rates Section
150 North 18th Avenue, Suite 540
Phoenix, AZ 85007-3248
Telephone: (602) 364-3150
Fax: (602) 364-3567

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AMBULANCE REVENUE AND COST REPORT

FIRE DISTRICT and SMALL RURAL COMPANY

AMBULANCE SERVICE ENTITY:

Superior Emergency Medical Services

FOR THE PERIOD

FROM: July 1, 2012

TO: June 30, 2013

STATISTICAL SUPPORT DATA

Line No.	DESCRIPTION	(1) SUBSCRIPTION SERVICE TRANSPORTS	* (2) TRANSPORTS UNDER CONTRACT	(3) TRANSPORTS NOT UNDER CONTRACT	(4) TOTALS
1	Number of ALS Billable Transports:			265	265
2	Number of BLS Billable Transports:			37	37
3	Number of Loaded Billable Miles:			11,191	11,191
4	Waiting Time (Hr. & Min.):				
5	Canceled (Non-Billable) Runs:				

AMBULANCE SERVICE ROUTINE OPERATING REVENUE

6	ALS Base Rate Revenue			\$	344,768
7	BLS Base Rate Revenue				48,052
8	Mileage Charge Revenue				184,582
9	Waiting Charge Revenue				
10	Medical Supplies Charge Revenue				
11	Nurses Charge Revenue				
12	Standby Charge Revenue (Attach Schedule)				
13	TOTAL AMBULANCE SERVICE ROUTINE OPERATING REVENUE		(Post to Page 3, Line 1)	\$	577,401

SALARY AND WAGE EXPENSE DETAIL

GROSS WAGES:

** No. of FTE's

14	Management		\$		
15	Paramedics and IEMTs		\$	127,806	4.0
16	Emergency Medical Technician (EMT)		\$	68,175	2.0
17	Other Personnel		\$	66,601	
18	Payroll Taxes and Fringe Benefits - All Personnel		\$	83,866	
19	Total Wages, Taxes & Benefits	(Sum Lines 14 through 18; Post to Page 3, Line 10)	\$	346,448	

* This column reports only those runs where a contracted discount rate was applied.

** Full-time equivalents (F.T.E.) is the sum of all hours for which employees wages were paid during the year divided by 2080.

AMBULANCE REVENUE AND COST REPORT

FIRE DISTRICT and SMALL RURAL COMPANY

AMBULANCE SERVICE ENTITY:

Superior Emergency Medical Services

FOR THE PERIOD

FROM:

July 1, 2012

TO: June 31, 2013

SCHEDULE OF REVENUES AND EXPENSES

Line

No.

DESCRIPTION

Operating Revenues:

1 Total Ambulance Service Operating Revenue (From: Page 2, Line 13) \$ 577,401

Settlement Amounts:

2 AHCCCS 46,133

3 Medicare 169,254

4 Subscription Service

5 Contractual

6 Other

7 Total (Sum of Lines 2 through 6) 215,387

8 Total Operating Revenue (Line 1 minus Line 7) \$ 362,014

Operating Expenses:

9 Bad Debt \$ 74,323

10 Total Salaries, Wages, and Employee-Related Expenses (From: Page 2, Line 19) 346,448

11 Professional Services 20,258

12 Travel and Entertainment

13 Other General Administrative 4,636

14 Depreciation

15 Rent / Leasing

16 Building / Station

17 Vehicle Expense 14,185

18 Other Operating Expense 15,212

19 Cost of Medical Supplies Charged to Patients

20 Interest

21 Subscription Service Sales Expense

22 Total Operating Expense (Sum of Lines 9 through 21) 475,062

23 Total Operating Income or (Loss) (Line 8 minus Line 22) \$ (113,047)

24 Subscription Contract Sales 37,500

25 Other Operating Revenue

26 Local Supportive Funding

27 Other Non-Operating Income (Attach Schedule)

28 Other Non-Operating Expense (Attach Schedule)

29 NET INCOME or (LOSS) Before Income Taxes (Sum of Lines 23 through 27, minus Line 28) \$ (75,547)

Provision for Income Taxes:

30 Federal Income Tax

31 State Income Tax

32 Total Income Tax (Line 30, plus Line 31)

33 Ambulance Service Net Income (Loss) (Line 29, minus Line 32) (75,547)

AMBULANCE REVENUE AND COST REPORT

FIRE DISTRICT and SMALL RURAL COMPANY

AMBULANCE SERVICE ENTITY: Superior Emergency Medical Services

FOR THE PERIOD FROM: July 1, 2012 TO: June 31, 2013

BALANCE SHEET

ASSETS

CURRENT ASSETS

1	Cash	\$	_____	
2	Accounts Receivable		_____	
3	Less: Allowance for Doubtful Accounts		_____	
4	Inventory		_____	
5	Prepaid Expense		_____	
6	Other Current Assets		_____	
7	TOTAL CURRENT ASSETS			\$ _____

9	PROPERTY & EQUIPMENT			
10	Less: Accumulated Depreciation			

11	OTHER NON CURRENT ASSETS			
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12	TOTAL ASSETS			\$ _____
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LIABILITIES & EQUITY

CURRENT LIABILITIES

13	Accounts Payable	\$	_____	
14	Current Portion of Notes Payable		_____	
15	Current Portion of Long-Term Debt		_____	
16	Deferred Subscription Income		_____	
17	Accrued Expenses and Other		_____	
18	_____		_____	
19	_____		_____	
20	TOTAL CURRENT LIABILITIES			\$ _____

21	NOTES PAYABLE		_____	
22	LONG-TERM DEBT, OTHER		_____	
23	TOTAL LONG-TERM DEBT			_____

EQUITY & OTHER CREDITS

Paid-In Capital:

24	Common Stock		_____	
25	Paid-In Capital in Excess of Par Value		_____	
26	Contributed Capital		_____	
27	Retained Earnings		_____	
28	_____		-	
29	_____		-	
30	Fund Balance		-	
31	TOTAL EQUITY			_____

32	TOTAL LIABILITIES & EQUITY			\$ _____
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AMBULANCE REVENUE AND COST REPORT

AMBULANCE SERVICE ENTITY:

Superior Emergency Medical Services

FOR THE PERIOD

FROM:

July 1, 2012

TO:

June 31, 2013

STATEMENT OF CASH FLOWS

OPERATING ACTIVITIES:

1 Net (loss) Income \$ _____

Adjustments to Reconcile Net Income to Net Cash

Provided by Operating Activities:

Note: a increase in these accounts improves cash flow

2 Depreciation Expense _____

3 Deferred Income Tax _____

4 Loss (gain) on Disposal of Property & Equipment _____

(Increase) Decrease in:

Note: a decrease in these accounts improves cash flow

5 Accounts Receivable _____

6 Inventories _____

7 Prepaid Expenses _____

Increase (Decrease) in:

Note: a increase in these accounts improves cash flow

8 Accounts Payable _____

9 Accrued Expenses _____

10 Deferred Subscription Income _____

11 NET CASH PROVIDED (Used) BY OPERATING ACTIVITIES \$ _____

INVESTING ACTIVITIES:

12 Purchases of Property & Equipment _____

13 Proceeds from Disposal of Property & Equipment _____

14 Purchases of Investments _____

15 Proceeds from Disposal of Investments _____

16 Loans Made _____

17 Collections on Loans _____

18 Other _____

19 NET CASH PROVIDED (Used) BY INVESTING ACTIVITIES _____

FINANCING ACTIVITIES:

New Borrowings:

20 Long-Term _____

21 Short-Term _____

Debt Reduction:

22 Long-Term _____

23 Short-Term _____

24 Capital Contributions _____

25 Dividends Paid \$ _____

26 NET CASH PROVIDED (Used) BY FINANCING ACTIVITIES _____

27 NET INCREASE (Decrease) IN CASH _____

28 CASH AT BEGINNING OF YEAR _____

29 CASH AT END OF YEAR _____

SUPPLEMENTAL DISCLOSURES:

Non-cash Investing and Financing Transactions:

30 _____

31 _____

32 _____

33 Interest Paid (Net of Amounts Capitalized) _____

34 Income Taxes Paid \$ _____